PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. Department of the Papagoint Production Act of 1005, no persons are positived to personal to a collection of information upon the light on such CME center to produce the Papagoint CME center to

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/695,178			ing Date 28/2003	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN
Н	FOR	l N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	-	N/A	LD NO	N/A		N/A	TEE (a)	i	N/A	TEE (8)
┢	SEARCH FEE	or (c))	N/A		N/A		N/A		1	N/A	
H	(37 CFR 1.16(k), (i), (ii)		N/A	_	N/A		N/A		ł	N/A	
	(37 CFR 1.16(o), (p), (FAL CLAIMS	or (q))	minus 20 =				x \$ =		OR	x s =	
INE	CFR 1.16(i)) EPENDENT CLAIM	s	minus 3 = *			ł	x s =			x s =	
(37	CFR 1.16(h))	If the		ation and drawin	as exceed 100	ł			ł		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	sheets of paper, the application size is \$250 (\$125 for small entity) for ea additional 50 sheets or fraction there 35 U.S.C. 41(a)(1)(G) and 37 CFR 1								
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								1		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								1	TOTAL	
										ER THAN	
AMENDMENT	CLAIMS		_	HIGHEST	, ,		01171	L LIVIIII	T	T	
	07/06/2010	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	* 5	Minus	~ 33	= 0	1	x \$ =		OR	X \$52=	0
	Independent (37 CFR 1,16(h))	• 1	Minus	3	= 0	1	x \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.1601)		Minus		-	1	x \$ =		OR	x s =	
	Independent (37 CFR 1,16(h))		Minus	***	-]	x \$ =		OR	x s =	
ā	Application Size Fee (37 CFR 1.16(s))					1			1		
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR		
									OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1.											

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